RECEIVED

Freedom Fund North America

801 Penn. Ave. NW, Suite 610 Washington, DC 20004 2012 OCT 16 AM II: 17
FEC MAIL CENTER

October 15, 2012

Federal Election Commission 999 E St. NW Washington, DC 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated contributions, to federal candidates or committees.

Respectfully submitted,

melæl Gelaun

Michael G. Adams

Treasurer

12030910427

FORM 1

STATEMENT OF **ORGANIZATION**

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2012 OCT 16 AM II: 17

		•	FEC STAGE USE ONLY TO LIN				
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5				
FIREIEIDOM FILINIDI NORITHI AMERICIA							
ADDRESS (number and street)	DDRESS (number and street) 8101 PEMNS YLUANTA A 45 NW.						
(Check if address is changed)	SIGITIE 16110						
	CITY A	<i>N</i>	DC 20004 - ZIP CODE ▲				
COMMITTEE'S E-MAIL ADDRE	ss		•				
☐ (Check if address is changed)							
	Optional Second E-Mail Add	fress					
			 				
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)						
2. DATE (O'LS' DOLD							
3. FEC IDENTIFICATION NUMBER ▶							
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)							
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Time on Brief Name of Transvers Michael Co. A. A.							
Signature of Treasurer Mchaeld adam Date 10 13 2012							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
Office Use Only		For further information (Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100					

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TYPE OF COMMITTEE Candidate Cammittee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name Candi						
Candi Party	dale Affiliati	on Office State President District				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Candi						
Party	y Con	nmittee:				
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.				
Polit	ical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:				
		Corporation Corporation w/o Capital Stock Labor Organization				
		Membarship Organization Trade Association Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint	Func	iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a faderal candidate.				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee	Name	
Freedo	m Fund North America	ž
	ted Organization, Affiliated Committee, Joint Fundraising Represen	
NUNGIII		
Mailing Address		
	CITY	TATE ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Rep	presentative Leadership PAC Sponsor
rtelationship.	Annual Committee	Leadership I Ao oponson
		4.0
 Custodian of Records books and records. 	: Identify by name, address (phone number — optional) and position of	or the person in possession of committee
Full Name Mil	CHAEL G. ADAMS	
Mailing Address	BOIL PENUSYLVANIA AVE	NW
	SIGITIFE IGIO	<u> </u>
	MAISHITMEITOIN	20004-
Title or Position	CITY STA	ATE ZIP CODE
	J. 1	211 0002
TAEA SURE	Telephone number	202-372-91/12
		
	ne and address (phone number optional) of the treasurer of the con e.g., assistant treasurer).	nmittee; and the name and address of
	,	
Full Name of Treasurer	CHABLIG ADAMS	
Mailing Address	BIOLI PENNSYLVANITA AVIE	NW
-	SMITTEL GILD	
		20004
	CITY STA	•
Title or Position	-0	
TREASURE	Telephone number	B013-312-8115

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

12030910430

Mailing Address

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS** Express Mail Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Fich Fy Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED

(3/2005)